

License Application Information

GENERAL APPLICATION INFORMATION

Reference Documents

Arizona Revised Statutes, Title 9, Cities and Towns, Chapter 7, Article 4

Important Facts

- The application review process will be suspended due to incomplete applications.
- Any documents in this packet may be found on the City website at www.sedona.az.gov.
- Applicants may receive a clarification from the City of Sedona of any interpretation or application
 of a statute, ordinance, code, or authorized substantive policy statement
 affecting the procurement of a license by providing the municipality a written request.

City of Sedona Contact

For questions on this application, please contact:

Financial Services Department

Email: businesslicense@sedonaaz.gov

Phone: 928-204-7185

Application Requirements

All of the following documents are required

** All information must be completed before any review will take place**

- \$50.00 License Fee paid to City of Sedona. (Non-refundable)
- Application for City of Sedona Business License.
- An affidavit of lawful presence for the person(s) applying for the business license. These applicants must provide evidence of their legal right to be in the United States in compliance with A.R.S. 41-1080, also known as the "Legal Arizona Workers Act".
- A copy of the owner's Driver License or another form of identification.
- Tenant occupancy permit, if applicable.

If you are unsure which licensing requirements are applicable for your business, please contact the City at 928-204-7185 for more information.

Review Timeframes

Administrative Review: 7 Business Days Substantive Review: 40 Business Days Total review: 47 Business Days

Please Note: Timeframes may be less if all information is provided in a timely manner



License Application Information

APPLICATION REVIEW INFORMATION

PHASE 1- ADMINISTRATIVE REVIEW

Timeframe: 7 Business Days

Notification of incomplete application information will suspend the overall review timeframe.

- 1. City of Sedona (Initial Review)
 - a) A complete application will proceed to Phase 2-Substantive Review.
- b) An incomplete application will be sent a comprehensive written notice of all incomplete application items.
- 2. Business owner (Follow-up)- 15 days
 - a) If no information is returned to the City within 15 days, the City will consider the application withdrawn and all fees will be forfeited.
 - b) If information is returned within 15 days, the City will continue the review of the application.
- 3. The review and notification process will continue for two reviews. After the second request for more information, the City of Sedona will not send a third request and the application will be withdrawn and all fees forfeited.

PHASE 2- SUBSTANTIVE REVIEW

Timeframe: 40 Business Days

Notification of incomplete application information will suspend the overall review timeframe.

- 1. Substantive Review- City of Sedona (Initial Review)- 40 Days from the date of the completed application as noted in Phase 1- Administrative Review.
 - a) If no other information is required, the City will issue the license within 40 days.
 - b) If more information is required, a comprehensive written notice of all items that require further explanation will be sent. Upon mailing of the notice, the review timeline will be suspended until all requested information is provided.
- 2. Taxpayer (Follow-up)- 30 days
 - a) If no information is returned to the City within 30 days, the City will consider the application withdrawn and all fees forfeited.
 - b) If information is returned within 30 days, the City will continue the review of the application.
 - c) If no information or incomplete information is returned to the City within 30 days, the City will deny the application and all fees will be forfeited.

PHASE 3- LICENSE ISSUANCE OR DENIAL

- 1. If all requirements are met, the license will be issued and mailed.
- 2. If all requirements are not met, a license denial letter will be mailed to the applicant with detailed information of the appeals process and contact person(s).



APPLICATION FOR CITY OF SEDONA BUSINESS LICENSE

Please Complete Application and Mail or Deliver with Payment to:

City of Sedona Finance Office 102 Roadrunner Drive Sedona, AZ 86336

Phone #: (928) 204-7185

Email: BusinessLicense@sedonaaz.gov

PLEASE PRINT INFORMATION LEGIBLY AND COMPLETE ALL SECTIONS. PLEASE KEEP A COPY FOR YOUR RECORDS. Your license may require you to submit proof of certification and/or permit with your payment. Application for a business license shall be accompanied by the non-refundable business license fee, in the initial amount of (see fee schedule) for each business. Separate licenses shall be obtained for each branch establishment or separate location of a business. A business license shall be obtained for every business covered in Sedona City Code Chapter 5.05.

Start Date within the Sedona city I	(Required)	Short Term Rer	ntal Check Box				
Name Change OR Mailing Address	Change (\$10	Fee)					
Business License Fee: \$50.00			Make Checks Payable to: City of Sedona				
Have you applied for your Tenant Occup	ancy Permit (i	f located in city limits)	Yes No No				
Section 1. Business Information							
Business Name (Legal Name)			Doing Business as Name (DBA Name) if different from legal name				
Physical Address of Business			Tax Parcel Number (Required)				
City			State Zip				
Business Phone			Cell Phone				
E-mail Address		Federal ID #	State of AZ TPT # (see below)	AZ ROC (Contractors) License #			
To obtain a State of Arizona TPT Lice Arizona TPT License number, please				icense. If you already have a State of			
Additional DBA in same physical location with san	ne FEIN# for \$5.0	0					
For Short-term rental, vacation rental or transie	nt lodging busine	esses, provide the name and a valid te	lephone number for a 24-hour emerger	ncy contact below: (Required)			
Section 2. Mailing Address							
If Different from Section I (above) enter Business	Name, Owner Na	ame or Care-of Name					
Mailing Address							
City			State	Zip			
Section 3. Business Ownership & Records Lo	cation						
Ownership Type: Sole Proprietor	L	Partnership Corporation -	State if Inc.	Other			
Owners, Partners, Officers, Individuals,	Name & Title			Cell Phone#			
or LLC Members.	Home Address			Phone #			
For any additional names, please attach a list.	City, State, Zip			E-mail			
attach a list.	Name & Title			Cell Phone#			
	Home Address		Phone #				
	City, State, Zip			E-mail			
Corporate or LLC Statutory Agent	Name			Phone #			

Section 4. Commercial Rental Business							
If you own a Commercial rental property, yo	ou must remit T	ransaction Privile	ge Tax to the State	of Arizona equal to 3% of th	e Gross Income derive	ed from such activ	ity.
Total Number of Commercial Rentals:	_						
Address of Location #1							
Address of Location #2							
Address of Location #3							
Address of Location #4							
Address of Location #5							
Address of Location #6							
Section 5. Business Type and Premises Statu	ıs						
Retail Sales Wholesaler F	Restaurant/Bar			Manufacturing (Term Rental
Describe the Nature of the Business:						NA	AICS Code:
Do you own your Business Location?	Landlord Nam	e & Address:				Landlord Phone #	
Yes No - Please complete:							
Is this a Home Based Business ?	Yes	No 🔲	(May be subje	ct to Home Inspection)			
If yes was selected above, please review the	enclosed Home	Occupation Sedo	na Land Developme	ent Code and Initial Here:			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
All areas of the application and accompanyi By signing below, I am certifying under penal the Sedona City Code, Sedona Land Developr fees payable to the City pursuant to Sedona of any and all outstanding obligations and I a not permit business operations unless busine By signing this application, I understand that understand the City may need to request add requests for additional information if deemen	ty of perjury that ment Code or the City Code or the comment making its is properly and the completion ditional information dinecessary.	at I have provided e Arizona Revised Land Developme ng any and all pay oned, has obtaine and submission o tion from me cond	complete and accu I Statutes and I do r nt Code unless I have ments required und d proper building p of this form does no cerning my applicat	rate information on this appliot owe the City any delinque ve entered into a written payrider the terms of such an agreermits, occupancy certification t guarantee the approval or sion and hereby mutually agree	ication and I have not wont City Transaction Privement agreement appropriate I understand is on and/or is in compliar ubsequent issuance of	vilege Tax or any o oved by the City re suance of a busine nce with all applica a license to do bu ed to submit supp	ther delinquent lating to payment ess license does able laws/rules. siness. I
Printed Name:				Date:			-
For City Office Use Only				1			
Form complete and signature		Comm Dev					
Payment included							
Affidavit completed							
Finance UB, TPT, BL approval	1						



CITY OF SEDONA, ARIZONA AFFIDAVIT DEMONSTRATING LAWFUL PRESENCE IN THE UNITED STATES

ARS §1-502 requires that any person who applies to the City for a local public benefit (defined as a grant, contract, loan, professional license, or commercial license) must demonstrate through the presentation of one of the following documents that he/she is lawfully present in the United States.

LAWFUL PRESENCE IN THE UNITED STATES CAN BE DEMONSTRATED BY PRESENTATION OF ONE (1) OF THE DOCUMENTS LISTED BELOW.

Please place a check mark next to the applicable document and present the document to the City employee. If mailing the document, attach a copy of the document to this Affidavit. (If the document says on its face that it may not be copied or you know for reasons of confidentiality that it cannot be copied, you will need to present the document in person to the City for review and signing of the affidavit.)

П	1.	A valid driver license issued after 1996
		Print first 4 numbers/letters from license:
	2.	A valid non-operating identification License
_		Print first 4 numbers/letters:
	3.	A birth certificate or delayed birth certificate issued in any state, territory or possession of the
		United States
		Year of birth: Place of birth:
	4.	A United States Certificate of Birth abroad
_		Year of birth: Place of birth:
	5.	A United States passport
		Print first 4 numbers/letters from Passport:
	6.	A foreign passport with a United States Visa
_		Print first 4 numbers/letters from Passport
		Print first 4 numbers/letters from Visa
	7	An I-94 form with a photograph
	•	Print first 4 numbers from I-94:
	8	A United States Citizenship and Immigration Services Employment Authorization Document
	0.	(EAD)
		Print first 4 numbers/letters from EAD:
	9	Refugee travel document
	٠.	Date of Issuance:Refugee Country:
	10	A United States Certificate of Naturalization
Ш	10.	Drint first A digits of CIC Dog No.
	11	A United States Certificate of Citizenship
Ш	11.	Date of Issuance: Place of Issuance:
	12	A tribal Certificate of Indian Blood
	14.	Date of Issuance: Name of Tribe:
П	13	A tribal or Bureau of Indian Affairs Affidavit of Birth
	13.	Year of Birth: Place of Birth:
		Tear of Birth.
In accor	rdan	ce with the requirements of State Law, I do swear or affirm under penalty of perjury that I am lawfully
		ne United States and that the document I presented to establish this presence is true.
•		
Signatu	re	Business/Company
υ		
Print Name		Business Address
Date: _		
		City, State, Zip Code